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APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
10/052,212	01/16/2002	Robert Hagen	LIFE033

24353
BOZICEVIC, FIELD & FRANCIS LLP
200 MIDDLEFIELD RD
SUITE 200
MENLO PARK, CA 94025

CONFIRMATION NO. 2190

FORMALITIES LETTER



OC00000007490188

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Date Mailed: 02/19/2002

NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

Filing Date Granted

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The statutory basic filing fee is missing.
Applicant must submit \$ 740 to complete the basic filing fee for a non-small entity. If appropriate, applicant may make a written assertion of entitlement to small entity status and pay the small entity filing fee (37 CFR 1.27).
- Total additional claim fee(s) for this application is \$1470.
 - \$1386 for 77 total claims over 20.
 - \$84 for 1 independent claims over 3.
- The oath or declaration is missing.
A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(l) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.
- The balance due by applicant is \$ 2340.

04/16/2002 SSALEEKU 00000006 500815 10052212

01 FC:102 252.00 CH
02 FC:103 756.00 CH
03 FC:104 280.00 CH

A copy of this notice **MUST** be returned with the reply

Void date: 04/16/2002 SSALEEKU
04/16/2002 SSALEEKU 00000006 500815 10052212
02 FC:103 756.00 CR

Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 1 - ATTORNEY/APPLICANT COPY

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01 FC:103 252.00 CH

Adjustment date: 04/16/2002 SSALEEKU
03/27/2002 MAHMEH1 00000107 500815 10052212
02 FC:102 336.00 CR
03/27/2002 MAHMEH1 00000107 500815 10052212
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Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/052,212
	Filing Date	January 16, 2002
	First Named Inventor	HAGEN, ROBERT
	Group Art Unit	3651
	Examiner Name	Unassigned
Total Number of Pages in This Submission	Attorney Docket Number	LIFE-033
ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Copy of Notice to File Missing Parts <ul style="list-style-type: none">• Declaration and Power of Attorney (in two counterparts)• Application as filed• Return receipt postcard
<input checked="" type="checkbox"/> Preliminary Amendment <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)		
<input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents		
<input checked="" type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual Name	CAROL M. LASALLE, Reg. No. 39,740	
Signature		
Date	March 14, 2002	

CERTIFICATE OF MAILING		
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: March 14, 2002.		
Typed or printed name	Donna Macedo	
Signature		Date March 14, 2002

Burden Hour Statement: This form is estimated to take .2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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FEE TRANSMITTAL for FY 2002				Complete if Known																																																																																																																																																																																									
<div style="border: 1px solid black; border-radius: 50%; width: 100px; height: 100px; display: flex; align-items: center; justify-content: center; margin: 0 auto;"> <div style="text-align: center;"> <div style="font-size: 0.8em; margin-bottom: 5px;">MAR 25 2002</div> <div style="font-size: 0.7em;">PATENT & TRADEMARK OFFICE</div> </div> </div> <p style="text-align: center; font-size: 0.8em;">Patent fees are subject to annual revision.</p>				Application Number		10/052,212																																																																																																																																																																																							
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<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit overpayments to:</p> <p>Deposit Account Number 50-0815</p> <p>Deposit Account Name Bozicevic, Field & Francis LLP</p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p><input type="checkbox"/> Applicant Claims small entity status. See 37 CFR 1.27</p> <p>2. <input type="checkbox"/> Payment Enclosed:</p> <p><input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p>																																																																																																																																																																																													
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Signature		Date	03/14/2002		

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